PLEASE NOTE: YOU MUST



## COMBINED DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO.

FOR PATENT AND DESIGN APPLICATIONS

6468 3606-0113P

COUNTE THE	TORTIAL	TAND DESIGN	THE THE CHILD	***************************************					
FOLLOWING:	As a below named invent	or, I hereby declare tha	it: my residence, post office ad	ldress and citizenship are as					
1	stated next to my name; that I	l verily believe that I am	the original, first and sole inv	entor ( if only one inventor					
	is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject								
	matter which is claimed and for which a patent is sought on the invention entitled:								
Insert Title:	→ Method and device	for the anten	na selection in a	digital					
	telecommunication								
	LETECOMMUTITE BETON	System							
Fill in Appropriate	the specification of which is a	stacked bosets. If see	assabid bassa						
Information -	the specification of which is attached hereto. If not attached hereto, the specification was filed on January 19, 2001 as								
For Use Without		as							
Specification Attached:		ication Number <u>09/7</u>		; and /or					
	the specification	n was filed on <u>JU</u>	LY 16 1999	as PCT					
		ication Number PCT/		; and was					
	amended under PC	T Article 19 on	(u	applicable)					
	including the claims, as amen	ded by any amendmen	tand the contents of the about referred to above. which is material to patentab	·					
	Code of Federal Regulations,	Code of Federal Regulations, §1.56.  I do not know and do not believe the same was ever known or used in the United States of America before							
	i do not know and do not	believe the same was ev	er known or used in the Unite	ed States of America before					
	my or our invention thereof, o	my or our invention thereof, or patented or described in any printed publication in any country before my or							
	our invention thereof or more								
		on sale in the United States of America more than one year prior to this application, that the invention has not							
	been patented or made the su	been patented or made the subject of an inventor's certificate issued before the date of this application in any							
	country foreign to the United	country foreign to the United States of America on an application filed by me or my legal representatives or							
	assigns more than twelve months (six months for designs) prior to this application, and that no application for								
	patent or inventor's certificate on this invention has been filed in any country foreign to the United States of								
		America prior to this application by me or my legal representatives or assigns, except as follows.							
	I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign								
	application (s) for nature or i	nuentor's servicions lis	and below and have also id-	and believe the					
	application(s) for patent or inventor's certificate listed below and have also identified below any foreign								
	application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:								
Insert Priority									
•	priority is claimed.								
AMOUNTAINOUS III	-	(a)							
Information:	Prior Foreign Application	(s)	IIII V 21 1008	Priority Claimed					
(if appropriate)	Prior Foreign Application M198A001674	<u> </u>	JULY 21, 1998	Priority Claimed					
	Prior Foreign Application M198A001674 (Number)	(S)  ITALY  (Country)	JULY 21, 1998 (Month/Day/Year Filed)						
	Prior Foreign Application M198A001674 (Number)	(Country)	(Month/Day/Year Filed)						
	Prior Foreign Application M198A001674 (Number)	<u> </u>		· Yes No					
	Prior Foreign Application M198A001674 (Number) (Number) (Number)	(Country)	(Month/Day/Year Filed)	Yes No					
	Prior Foreign Application M198A001674 (Number)	(Country)	(Month/Day/Year Filed)						
	Prior Foreign Application M198A001674 (Number) (Number) (Number)	(Country)	(Month/Day/Year Filed)  (Month/Day/Year Filed)	Yes No					
	Prior Foreign Application M198A001674 (Number) (Number) (Number)	(Country)	(Month/Day/Year Filed)  (Month/Day/Year Filed)	Yes No					
	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number)	(Country) (Country)	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)	Yes No					
	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number)	(Country) (Country)	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)						
(if appropriate)	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number) (Number) I hereby claim the benefit	(Country) (Country) (Country) (Country)	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)	Yes No					
(if appropriate)	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number) (Number)	(Country) (Country) (Country) (Country)	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)	Yes No					
(if appropriate)  (Insert Provisional Application(s):	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number)  (Number)  I hereby claim the benefit application(s) listed below.	(Country) (Country) (Country) (Country)	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  d States Code, §119(e) of any	Yes No					
(if appropriate)	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number) (Number) I hereby claim the benefit	(Country) (Country) (Country) (Country)	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)	Yes No					
(if appropriate)  (Insert Provisional Application(s):	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number) (Number) I hereby claim the benefit application(s) listed below.	(Country) (Country) (Country) (Country)	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  d States Code, §119(e) of any	Yes No United States provisional					
(if appropriate)  (Insert Provisional Application(s):	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number) (Number) I hereby claim the benefit application (s) listed below. (Application Number)	TALY (Country)	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  d States Code, §119(e) of any  (Filing I	Yes No United States provisional					
(if appropriate)  (Insert Provisional Application(s):	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number) (Number) I hereby claim the benefit application(s) listed below.	TALY (Country)	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  d States Code, §119(e) of any  (Filing I	Yes No United States provisional					
(if appropriate)  (Insert Provisional Application(s):	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number) (Number) I hereby claim the benefit application (s) listed below. (Application Number)	(Country) (Country) (Country) (Country) (Country) (under Title 35, United	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  d States Code, §119(e) of any  (Filing to the control of the contr	Yes No United States provisional					
(if appropriate)  Insert Provisional Application(s): (if any)  Insert Requested Information:	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number) (Number) I hereby claim the benefit application (s) listed below. (Application Number) All Foreign Applications, if a	(Country) (Country) (Country) (Country) (Country) (Country) (under Title 35, United	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  d States Code, §119(e) of any  (Filing I	Yes No United States provisional					
(if appropriate)  (Insert Provisional Application(s):	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number) (Number) I hereby claim the benefit application (s) listed below. (Application Number) All Foreign Applications, if a Months for Designs) Prior To	(Country) (Country) (Country) (Country) (Country) (Country) (under Title 35, United	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  d States Code, §119(e) of any  (Filing I	Yes No United States provisional  Date)  More Than 12 Months (6					
(if appropriate)  Insert Provisional Application(s): (if any)  Insert Requested Information:	Prior Foreign Application M198A001674 (Number) (Number) (Number) (Number) (Number) I hereby claim the benefit application (s) listed below. (Application Number) All Foreign Applications, if a Months for Designs) Prior To Country	(Country) (Country) (Country) (Country) (Country) (Country) (under Title 35, United	(Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  (Month/Day/Year Filed)  d States Code, §119(e) of any  (Filing I	Yes No United States provisional  Date)  Date of Filing (Month/Day/Year)					

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

nsert Prior U.S.

upplication(s):

(Application Number)

if any)

(Filing Date)

(Status - patented, pending, abandoned)

(Application Number) (Filing Date)

(Scaus - patented, pending, abandoned)

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Terrell C. Birch	(Reg. No. 19.382)	Raymond C. Stewart	(Reg. No. 21,066)
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Send Correspondence to:

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YOU MUST COMPLETE THE FOLLOWING:

PLEASE NOTE:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole	GIVEN NAME FAMILY NAME	INVENTOR'S SIGNATURE		DATE-		
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Full Name of Third loventor, if any 3 - OO see above	ALESSANDRO BEBETTI	Alenando Bl		28/01/2001		
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Full Name of Fifth	GIVEN NAME FAMILY NAME	INVENTOR'S SIGNATURE	<u> </u>	DATE		
Inventor, if any	GIVEN NAME TAMIC NAME	MAN ELECTION O GLOWN OF THE		5/112		
ace above	Residence (City. State & Country)		CITIZENSHIP			
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)					
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Page 2 of 2	* DATE OF SIGNATURE					

(USPTO Approved 3-90) (Revised 8-97)